

SUPPLEMENTAL "LARGE CONTRIBUTION" REPORT BY A CANDIDATE'S COMMITTEE (\$1,000 CONTRIBUTIONS OR MORE)

State Form 48492 (R / 11-99) Indiana Election Commission (IC 3-9-5-20) Approved by State Board of Accounts 1999

INSTRUCTIONS: Only candidates receiving a "large contribution" are required to file this report. Please type or print legibly IN BLACK INK all information on this form. For assistance in completing this form, see instructions on the reverse side.

(IC 3-14-1-14) and may be subject to civil penalties (IC 3-9-4/16, 3-9-4-17, 3-9-4-18).

FILE NUMBER
TOTAL PAGES IN ENTIRE CFA-11 REPORT
. /

For assistance in completing this form, see instructions on the reverse si	ide.	o ignal" a sylaba	Local spatial ed not the		
COMMIT	TEE INFOR	MATION			
1. Full name of candidate (Include any nickname) Check if this is a new name		2. Committee telephone number (3/7) 590-37/0			
Mailing address (address where all campaign finance correspondence is received Box 904	ed) Ch	neck if this is a new address	al eldepiique may elej	qmea fearr e neo esse can	
4. City, state, ZIP code CARMEL IN 46032		5. Party affiliation or if independent REFULLICAN			
6. Office sought (Include district number, if any. Not required for exploratory committee.) HAMILTON CONTY CONTIL AT CAR65		7. County of residence			
8. Reporting period: 4/10/2000 Through: 4/27/2000	10 10 10 10 10 10 10 10 10 10 10 10 10 1	no leeges (sin e	ia adherenta meknam	of Casing	
For classification, enter INDV for individual; PAC for political NONE for all entries which are not one of the above categories.	al action co	ommittee; CORP for	corporation; LAB for lab	or organization	
CONTRIBUTOR'S FULL NAME AND OCCUPATION FULL MAILING ADDRESS	TYPE OF CONTRIBUTION OR OTHER RECEIPT		COLUMN A AMOUNT OF	DATE RECEIVE	
(street, number, city, state, ZIP code)			CONTRIBUTION	RECEIVED BY	
PAC MIBOR PAC (MPAC)	Contributions: ☑ Direct ☐ In-Kind (describe)		[‡] /000	4-10	
Indols IN 46202	Other Receipts:		The second services	RAM	
Contributor's Occupation (if applicable)		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			
Classification 2.		utions: t id (describe)	n gerled cavend as lin o's waste, watering a	ericensing	
Contributor's Occupation (if applicable)	Other R	est □Loan .	at gallier the eman semiline; CON 16 We satigued	int est ast	
Classification 3.	Contribu		ro matus de la material de la constante de la		
in Themas Transmit's estytest Neuprich can to	Other R	eceipts: st □Loan (specify)	2000 CLERK	1 10 10 34 M	
Contributor's Occupation (if applicable)					
CERTIFICATION I CERTIFY THAT I HAVE EXAMINED THIS STATEMENT. TO THE BEST TRUE, CORRECT AND COMPLETE. Signature on File WARNING: Any information contained in this report may not be socied for			B AN 9: 39	400	
WARNING: Any information contained in this report may not be copied to (IC 3-9-4-5) A person who knowingly files a fraudulent report commits a Cito file a complete or accurate report as required by the Indiana Campaign	lass D Felony	v. (IC 3-14-1-13) A perso	n who fails		